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## BIB DATA SHEET

CONFIRMATION NO. 7244

<b>SERIAL NUMBER</b> 10/593,052	<b>FILING or 371(c) DATE</b> 06/05/2007 <b>RULE</b>	<b>CLASS</b> 601	<b>GROUP ART UNIT</b> 3771	<b>ATTORNEY DOCKET NO.</b> LED-003	
<b>APPLICANTS</b> Jianjun Cui, Shandong, CHINA; ** <b>CONTINUING DATA</b> ***** /KCM/ This application is a 371 of PCT/CN2004/000355 04/15/2004 ** <b>FOREIGN APPLICATIONS</b> ***** /KCM/ CHINA 2004200392546 03/16/2004 ** <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** ** SMALL ENTITY ** 03/26/2008					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /KRISTEN CLARETTE Acknowledged MATTER/ Examiner's Signature	<input checked="" type="checkbox"/> Met after Allowance KCM Initials	<b>STATE OR COUNTRY</b> CHINA	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> <del>0</del>	<b>INDEPENDENT CLAIMS</b> <del>2</del>
<b>ADDRESS</b> Hasse & Nesbitt LLC 8837 Chapel Square Drive Suite C CINCINNATI, OH 45249 UNITED STATES					
<b>TITLE</b> MYOPIA THERAPY APPLIANCE AND A BLINDER WITH SAID APPLIANCE					
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		